

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Randy Hultgren for Congress

Full Name (Last, First, Middle Initial)

A. Hometown Storage

Mailing Address 2625 E Main Street

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		02		2014

City	State	Zip Code
Saint Charles	IL	60174-4289

Amount of Each Disbursement this Period

225

Purpose of Disbursement
Storage Unit Rental

001

Transaction ID : B-E-10731

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For:
	Senate	
	President	
		<input type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

B. iContactMailing Address 5221 Paramount Pkwy
Ste. 200

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		03		2014

City	State	Zip Code
Morrisville	NC	27560

Amount of Each Disbursement this Period

74

Purpose of Disbursement
E-Marketing

001

Transaction ID : B-E-10732

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For:
	Senate	
	President	
		<input type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

c. Inland Bank

Mailing Address 330 S Naperville Road

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		31		2014

City	State	Zip Code
Wheaton	IL	60187-5400

Amount of Each Disbursement this Period

5.5

Purpose of Disbursement
Bank Fees

001

Transaction ID : B-E-10890

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For:
	Senate	
	President	
		<input type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

304.50